Please Read the Following Information Concerning Form TSP-9

DO NOT USE THIS FORM if you are currently employed by the Federal Government. This change of address form is only for separated participants. It CANNOT be accepted by the TSP Service Office until your agency has notified the TSP record keeper that you have separated from service.

If you are an active Federal employee, only your agency can change your records for your TSP account. Therefore, you must contact your agency personnel or payroll office to change your TSP address.

For more information about changing your address, see "Your TSP Account Address," which is located in Forms & Publications under Fact Sheets.

TSP-9



If you are no longer employed by the Federal Government, use this form to notify the Thrift Savings Plan Service Office of a change in your address. **Note:** Active employees can change their addresses for their TSP accounts only through their employing agencies. They should **not** submit this form.

Type or print the information requested so that your TSP account records can be updated accurately and you will continue to receive important information about your account. Mail this form to:

Thrift Savings Plan Service Office National Finance Center P.O. Box 61500 New Orleans, LA 70161-1500

I. INFORMATION ABOUT YOU	You must provide your name, Social Security number, and date of birth to identify your account.					
	1. Name Last	First	Middle			
	2. Social Security No	3.	Date of Birth	/ Month	/ Day	Year
II. CHANGE TO BE MADE	4. Your New Address	mber				
	5. City	6.	State/Country	7.		
	8. Daytime Phone (Area Code and Number)	()		· 		
III. YOUR SIGNATURE	You must sign and date this form.					
	9. Participant's Signature			10	 ned	

PRIVACY ACT NOTICE. We are authorized to request this information under Title 5, U.S. Code Chapter 84, Federal Employees' Retirement System, Subchapter III, Thrift Savings Plan. Executive Order 9397 authorizes us to ask for your Social Security number, which will be used to identify your account. We will use the information you give us to update your address for the TSP. This information may be shared with other Federal agencies in order to administer your account or for statistical, auditing, or archiving purposes. It may also be shared with Federal, state, and local agencies to determine benefits under their programs, to obtain information necessary under this program, or to report income for tax purposes. In addition, we may share this

information with the Parent Locator Service, Department of Health and Human Services, for the purpose of enforcing child support obligations against the TSP participant. We may share this information with law enforcement agencies when they are investigating a violation of civil or criminal law. We may give this information to financial institutions, private sector audit firms, annuity vendors, current spouses and, to a limited extent, former spouses and beneficiaries. Finally, this information may also be disclosed to others on your written request. While the law does not require you to give any of the information we are asking for on this form, it may not be possible for the TSP Service Office to correspond with you if you do not give us this information.